

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWA!!

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Tanimura	Robert	Т	595-6521
MAILING ADDRESS (Street)			FAX
2262 Aulii Street			595-6561
(City)	(State)	(Zip Code)	
Honolulu	HI	96817	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip	Code)

PART II ORGANIZATION	TELEBLIONE		
NAME OF ORGANIZATION YOU LOS	TELEPHONE 805-372-7861 FAX		
Verizon Communications an			
MAILING ADDRESS (Street)			
112 South Lakeview Canyor	805-372-8649		
(City)	(State)	(Zip Code)	
Thousand Oaks	CA	91362	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
Robert Tanimura		595-6521	
MAILING ADDRESS (Street)	A Section of the Control of the Cont	FAX	
2262 Aulii Street		595-6561	
(City)	(State)	(Zip Code)	
Honolulu	HI	96817	

PART III DESCRIPTION	OF SUBJECTS UPON WH	ICH YOU EXPECT TO LOBBY	1		
Agriculture	Education	Human Services	Science, Technology & Economic Development		
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	☐ Tourism & Recreation		
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	☐ Transportation		
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & WaterUse Management	Other: (indicate below)		
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections			
	ON OF LOBBYIST				
I hereby certify that th	e information furnished abov	e is, to the best of my knowled	ge, correct and complete.		
Mt te 1/23/2007					
			(Date)		
	(Signature of Lobbyist)		(Date)		
PART V AUTHORIZATI	ON TO LOBBY				
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
	Director - State Government Relations				
Phillip Cleverly		Director - State Governme	TIT I Clations		
NAME OF ORGANIZATION (if applicable)			TELEPHONE		
Verizon			805-372-7861		
MAILING ADDRESS (Street)			FAX		
112 South Lakeview Road			805-372-8649		
(City)	(State) (Zip		(Zip Code)		
Thousand Oaks	CA 91362				
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned. 1 29 07					
(Signature of Authorizing Officer or Person Represented)			(Date)		

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